

1 Department of Commerce

2

3 Adopted Permanent Rules Relating to Long-Term Care

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5 Rules as Adopted

6 2745.0010 PURPOSE.

7 Parts 2745.0010 to 2745.0050 are authorized and adopted
8 pursuant to Minnesota Statutes, section 62A.56, subdivision 2.
9 Their purpose is to establish general standards to ensure that
10 assessments used in prescribing long-term care are reliable,
11 valid, and clinically appropriate. Parts 2745.0010 to 2745.0050
12 apply exclusively to insurance and subscriber contracts that
13 determine benefit entitlement based on an assessment of the
14 insured's ability to perform the activities of daily living and
15 to perform basic cognitive functions. Assessments satisfying
16 the general standards in parts 2745.0010 to 2745.0050 are
17 considered reliable, valid, and clinically appropriate.

18 2745.0020 ACTIVITIES OF DAILY LIVING.

19 General standards for determining coverage of long-term
20 care based on an assessment of the insured's inability to
21 perform activities of daily living include the following
22 activities with definitions of performance not more restrictive
23 than those shown in items A to E.

24 A. "Bathing" means washing oneself in either a tub or
25 shower, including getting into and out of the tub or shower, or
26 by sponge bath without the aid of another person.

27 B. "Dressing" means getting clothes from the closet
28 or drawers, putting on clothes, and attaching any necessary
29 braces or prosthesis without the aid of another person.

30 C. "Toileting" means getting to and from the toilet,
31 getting on and off the toilet, and performing associated
32 personal hygiene without the aid of another person.

33 D. "Transferring" means moving in and out of a bed,
34 chair, or wheelchair without the aid of another person.

35 E. "Eating" means feeding oneself by any means

1 without the aid of another person.

2 In addition to the activities in items A to E, other
3 reasonable activities of daily living such as continence,
4 walking, and wheeling may be taken into account if specified in
5 the insurance contract.

6 2745.0030 COGNITIVE IMPAIRMENT.

7 General standards for determining coverage of long-term
8 care based on cognitive impairment shall be based on an
9 assessment of the insured's ability to perform basic cognitive
10 functions. The definition of cognitive impairment shall not be
11 more restrictive than the definition in this part. "Cognitive
12 impairment" means deficiency in the ability to think, perceive,
13 reason, and/or remember that results in the inability to take
14 care of oneself without the ongoing assistance of or supervision
15 by another person.

16 2745.0040 USE OF ASSESSMENTS.

17 A long-term care insurance policy may use activities of
18 daily living and cognitive impairment assessments as a basis for
19 defining when a service, type of care, or procedure could not be
20 omitted without adversely affecting the patient's illness or
21 condition.

22 Determining impairment under the insurance contract shall
23 not be more restrictive than requiring either a deficiency in
24 three of the above activities of daily living or the presence of
25 cognitive impairment. An insurer may, by contract, require less
26 restrictive criteria than the above determining benefit
27 eligibility.

28 The determination of physical or cognitive impairment shall
29 be based on generally accepted tests that use objective measures
30 and produce verifiable results such as, but not limited to, the
31 most recently adopted Minnesota Department of Human Services
32 Preadmission Screening Assessment Form.

33 2745.0050 ALTERNATIVE STANDARDS AND CERTIFICATION.

34 If an insurer proposes standards other than those described

1 in parts 2745.0020, 2745.0030, and 2745.0040, upon request the
2 insurer shall provide to the department a detailed description
3 of the proposed assessment methodology explaining how the
4 assessment would reasonably be expected to produce reliable,
5 valid, and clinically appropriate results. The insurer is
6 responsible for demonstrating that the assessment is reliable,
7 valid, and clinically appropriate and not less beneficial to the
8 policyholder than the standards described in parts 2745.0020,
9 2745.0030, and 2745.0040. An officer of the insurance company
10 shall provide a certification that, to the best of the officer's
11 knowledge, the assessment methodology is reliable, valid, and
12 clinically appropriate.